

17264 U.S. PATENT  
09/15/03  
PCTO

Practitioner's Docket No. BLUE.65449

PATENT

Preliminary Classification:

Proposed Class:

Subclass:

22154 U.S. PTO  
10/662490  
09/15/03

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Mail Stop Patent Application  
Commissioner for Patents  
P.O. Box 1450  
Alexandria VA 22313-1450

NEW APPLICATION TRANSMITTAL

Transmitted herewith for filing is the patent application of

Inventor(s): Jacob de Baan

For (title): MOORING APPARATUS

1. Type of Application

This application is for an original (nonprovisional).

6191.1

EXPRESS MAILING UNDER 37 C.F.R. § 1.10\*

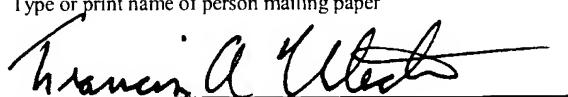
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I hereby certify that this paper, along with any document referred to, is being deposited with the United States Postal Service on this date September 15, 2003 in an envelope addressed to Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 as "Express Mail Post Office to Addressee" Mailing Label No. EV 320199677 US.

Francis A. Utecht  
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Date: Sept. 15, 2003

  
Signature of person certifying

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**2. Papers Enclosed**

**A.** Required for filing date under 37 C.F.R. § 1.53(b) (Regular) Application

15 Page(s) of Specification  
3 Page(s) of Claims  
3 Sheet(s) of Drawing(s)--Informal

**B.** Other Papers Enclosed

1 Page(s) of abstract

**3. Declaration or Oath**

Not Enclosed.

Application is made by a person authorized under 37 C.F.R. § 1.41(c) on behalf of the above-named inventor.

**4. Inventorship Statement**

The inventorship for all the claims in this application is the same.

**5. Language**

English

**7. Certified Copy**

Certified copy of application:

<u>Country</u>	<u>Application Number</u>	<u>Filed</u>
United Kingdom	GB 0221698.4	09/18/2002

from which priority is claimed is attached.

**8. Fee Calculation (37 C.F.R. § 1.16)**

Regular Application

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CLAIMS AS FILED

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Number Filed	Number Extra	Rate	Basic Fee 37 C.F.R. § 1.16(a)
Total Claims (37 C.F.R. § 1.16(c))	13 - 20 = 0	x \$ 18.00	\$ 750.00

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Independent  
Claims (37 C.F.R. §  
1.16(b)) 1 - 3 = 0 x \$ 84.00 = \$ 0.00

Multiple Dependent Claim(s),  
if any (37 C.F.R § 1.16(d)) \$ 280.00 \$ 0.00

Filing Fee Calculation \$750.00

## 9. Fee Payment Being Made at This Time

Enclosed

**Filing Fee** \$750.00

**Total Fees Enclosed** **\$750.00**

## **10. Method of Payment of Fees**

Attached is a check in the amount of \$750.00  
A duplicate of this paper is attached.

## 11. Instructions as to Overpayment

If any additional fee is required, charge Account No. 21-0800; likewise if any overpayment has been made, credit Account No. 21-0800.

Date: Sept. 15, 2003

Tranquill Black

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